MEDICAID BULLETIN

Project BRAVO: Behavioral Health Redesign for Access, Value & Outcomes, Reimbursement Rates for New Enhanced Behavioral Health Services Effective July 1, 2021 and the new Mental Health Services Manual (Formerly Community Mental Health Rehabilitation

Last Updated: 03/09/2022

https://dmas.virginia.gov



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Project BRAVO: Behavioral Health Redesign for Access, Value & Outcomes, **Reimbursement Rates for New Enhanced** Behavioral Health Services Effective July 1, 2021 and the new Mental Health Services **Manual (Formerly Community Mental Health** Rehabilitation

The purpose of this bulletin is to provide information about the reimbursement rates for the set of enhanced behavioral health services scheduled to begin for dates of service on or after July 1, 2021. The program design, service definitions, and benefit requirements will be posted for public comment in April 2021 as an Appendix to the newly re-named "Mental Health Services" Provider Manual (formerly known as the Community Mental Health and Rehabilitative Services Manual). Please see below for details and instructions on providing public comment.

In accordance with the amended and reenacted 2020 Virginia Acts of Assembly, Chapter 56, Item 313 YYY (2020 Appropriations Act), implementation of these new services under Project BRAVO (Behavioral Health Redesign for Access, Value and Outcomes), will begin July 1, 2021 with Mental Health Partial Hospitalization Program (MH-PHP), Mental Health Intensive Outpatient (MH-IOP) and Assertive Community Treatment (ACT). Multisystemic Therapy, Functional Family Therapy, Mobile Crisis, Community Stabilization, 23-hour Observation and Residential Crisis Stabilization services will follow, with implementation on December 1, 2021. This bulletin provides the reimbursement rates for the services scheduled to begin on July 1, 2021. DMAS will provide more information on the rates for services scheduled for December 1, 2021 at a later date.

Reimbursement Rates for New and Affected Services for dates of service on or after July 1, 2021:

| Service Name Start Date Procedure Code Type of | e of Program Rate |
|--|-------------------|
|--|-------------------|

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| Mental Health Partial Hospitalization Program (MH-PHP) | 7/1/2021 | H0035 | Community-Based Clinic Program | \$121.62/per diem | |
|--|----------|-------|-----------------------------------|-------------------|---|
| | | | Hospital Based | \$222.76/per diem | ĺ |
| | | | Mental Health | | Ĺ |
| | | | Program | | Ĺ |

| Service Name | Start Date | Procedure Code | Modifier | Modifier Meaning | Rate |
|---|------------|-----------------------|----------|-------------------|-------------------|
| Mental Health Intensive Outpatient (MH-IOP) | 7/1/2021 | S9480 | None | | \$141.51/per diem |
| | | | GO | With Occupational | \$142.96/per diem |
| | | | | Therapy | |

| Service Name | Start Date | Procedure Code | Modifier | Modifier Meaning | Rate |
|-------------------------------------|------------|-----------------------|----------|---|-------------------|
| Assertive Community Treatment (ACT) | 7/1/2021 | H0040 | none | Contracted as Base Fidelity Large Team | \$158.90/per diem |
| | | | U1 | Contracted as Base Fidelity Medium Team | \$169.33/per diem |
| | | | U2 | Contracted as Base Fidelity Small Team | \$195.20/per diem |
| | | | U3 | Contracted as High Fidelity Large Team | \$190.08/per diem |
| | | | U4 | Contracted as High Fidelity Medium Team | \$206.64/per diem |
| | | | U5 | Contracted as High Fidelity Small Team | \$245.29/per diem |

| Service Name | Start Date | Procedure Code | | Rate |
|--------------------------|------------|-----------------------|--|--|
| Psychotherapy for Crisis | 7/1/2021 | 90839 | | \$127.24/Facility Rate \$144.23/Non Facility Rate |
| | | 90840 | | \$60.33/Facility Rate \$68.30/Non Facility Rate |

DMAS Provider Manual

Policy and regulatory information will be posted on the Regulatory Town Hall for a 30-day

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public comment period. Please refer to DMAS Memo dated 06/01/2017, How to Receive Notice of and Submit Comments on DMAS Manual and Regulatory Changes for instructions on how to sign up for notifications here:

 $\frac{https://www.virginiamedicaid.dmas.virginia.gov/ECMPdfWeb/ECMServlet?memospdf=Medicaid+Memo+2017.05.19.pdf$

After public comment has ended and the policies have received approval, the policies will be posted here: https://www.virginiamedicaid.dmas.virginia.gov/wps/portal/ProviderManual

Training

DMAS is developing training sessions on the enhanced services. These sessions will review the

new services including provider requirements, covered services, documentation and billing

requirements. These sessions will be recorded and made available on the DMAS Behavioral Health Enhancement website. DMAS will send out notification via a Magellan of Virginia eblast when the recordings are available on the DMAS website.

| Virtual | Assertive Community Treatment |
|--------------|--|
| Training | |
| Session #1 | |
| Date & Time | May 25, 2021 @ 10:00am-12:00pm |
| Web Link | https://covaconf.webex.com/covaconf/onstage/g.php?MTID=ed02cfde027a13881e0c86e138521e3f2 |
| Call-In: | 1-866-692-4530 |
| Access code: | 185 152 1572 |
| Password: | nT2dt4RtRU7 |

| Virtual | Intensive Outpatient and Partial Hospitalization Program | |
|--------------|--|--|
| Training | | |
| Session #2 | | |
| Date & Time | May 26, 2021 @ 1:00pm-3:00pm (this is a change) | |
| Web Link: | https://covaconf.webex.com/covaconf/onstage/g.php?MTID=ee52f2bc4b2e0b63f793cbe7528f067cb | |
| Call-In: | 1-866-692-4530 | |
| Access code: | 185 564 7662 | |
| Password: | KzN3iNk2zj4 | |

Learning collaborative groups for providers of these services will be established through the existing stakeholder workgroups to support ongoing implementation and sustainability for

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these services; these groups will begin following the July 1, 2021 implementation. Information on the format will be available at a later date. DMAS will also seek to involve members participating in these services to provide feedback on their experiences for ongoing process improvement.

For questions, please email: enhancedbh@dmas.virginia.gov

| PROVIDER CONTACT INFORMAT | ION & RESOURCES | | | |
|---|--|--|--|--|
| Virginia Medicaid Web Portal | | | | |
| Automated Response System | | | | |
| (ARS) | | | | |
| Member eligibility, claims status, | www.virginiamedicaid.dmas.virginia.gov | | | |
| payment status, service limits, | | | | |
| service authorization status, and | | | | |
| remittance advice. | | | | |
| Medicall (Audio Response | | | | |
| System) | | | | |
| Member eligibility, claims status, | 1-800-884-9730 or 1-800-772-9996 | | | |
| payment status, service limits, | | | | |
| service authorization status, and | | | | |
| remittance advice. | | | | |
| KEPRO | | | | |
| Service authorization information | https://dmas.kepro.com/ | | | |
| for fee-for-service members. | | | | |
| | | | | |
| Provider Appeals | | | | |
| DMAS is launching an appeal portal | | | | |
| in late May 2021. You can use this | | | | |
| portal to file appeals and track the | https://www.dmas.virginia.gov/#/appealsresources | | | |
| status of your appeals. Visit the | | | | |
| website listed for appeal resources | | | | |
| and to register for the portal. | | | | |
| Managed Care Programs | 1 | | | |
| | inated Care Plus (CCC Plus), and Program of All- | | | |
| Inclusive Care for the Elderly (PACE). In order to be reimbursed for services provided to a | | | | |
| managed care enrolled individual, providers must follow their respective contract with the | | | | |
| managed care plan/PACE provider. The managed care plan may utilize different guidelines | | | | |
| than those described for Medicaid fee-for-service individuals. | | | | |
| Medallion 4.0 | http://www.dmas.virginia.gov/#/med4 | | | |
| CCC Plus | http://www.dmas.virginia.gov/#/cccplus | | | |
| PACE | http://www.dmas.virginia.gov/#/longtermprograms | | | |

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| Magellan Behavioral Health Behavioral Health Services Administrator, check eligibility, claim status, service limits, and service authorizations for fee-for- service members. | www.MagellanHealth.com/Provider For credentialing and behavioral health service information, visit: www.magellanofvirginia.com, email: VAProviderQuestions@MagellanHealth.com,or Call: 1-800-424-4046 |
|--|---|
| Provider HELPLINE Monday-Friday 8:00 a.m5:00 p.m. For provider use only, have Medicaid Provider ID Number available. | 1-804-786-6273 1-800-552-8627 |
| Aetna Better Health of Virginia | www.aetnabetterhealth.com/Virginia 1-800-279-1878 |
| Anthem HealthKeepers Plus | www.anthem.com/vamedicaid 1-800-901-0020 |
| Magellan Complete Care of Virginia | www.MCCofVA.com 1-800-424-4518 (TTY 711) or 1-800-643-2273 |
| Optima Family Care | 1-800-881-2166 www.optimahealth.com/medicaid |
| United Healthcare | www.Uhccommunityplan.com/VA and www.myuhc.com/communityplan 1-844-752-9434, TTY 711 |
| Virginia Premier | 1-800-727-7536 (TTY: 711), <u>www.virginiapremier.com</u> |